

YEMEN

Violence Against Health Care in Conflict 2024



**SAFEGUARDING
HEALTH
IN CONFLICT**



**Insecurity
Insight**
Data on People in Danger

Letter from the Chair



Assaults on health care in conflicts around the world reached new levels of horror in 2024, exceeding 3,600 incidents, 15% more than in 2023. They consisted of air, missile, and drone strikes; shelling; tank fire; shootings; arson; the looting and takeover of health facilities; and the arrest and detention of health workers. As the descriptions in this report show, each incident brings terror, trauma, and - in too many cases - injury, untreated illness, destruction and death.

By far the largest number of attacks on health care – more than 1,300 – took place in Gaza and the West Bank, far more than we have ever reported in one conflict in one year, including more than double the number of health workers killed. Gaza properly drew global attention for the ferocity and relentlessness of assaults on health care. But we must also reckon with the more than 2,300 attacks in other conflicts, including the hundreds in each of Ukraine, Lebanon, Myanmar and Sudan. The cumulative number of attacks over the course of wars that began in the past three years include more than 1,500 in Myanmar since the military coup in 2021; close to 2,000 in Ukraine since the Russian invasion of Ukraine in 2022, and more than 500 since the outbreak of war in Sudan in 2023.

This onslaught of violence has been accompanied by attempts by perpetrators to limit legal protections for health care and civilians in war, driven, as the International Committee of the Red Cross (ICRC) puts it, by a desire to have more “leeway to kill and detain.” Israel has sought to dilute legal requirements of precaution and proportionality during conflict. The new U.S. secretary of defense has called for “a law of war for winners.” Simultaneously, campaigns to delegitimize the International Criminal Court (ICC) are underway. The newly inaugurated U.S. president Donald Trump imposed sanctions on ICC staff and even their families for having charged Israelis with war crimes. In 2023, Russia’s Duma passed legislation criminalizing cooperation with the ICC or any foreign court or ad hoc tribunal that seeks to hold Russians to account. Hungary announced its plan to withdraw from the ICC, falsely alleging political bias.

These terrible developments threaten to make a mockery of the 10th anniversary of Security Council Resolution 2286 in 2026 and the 50th anniversary of the Additional Protocols of the Geneva Conventions (the law protecting health workers and civilians during armed conflict) in 2027. If this resolution and law are to be more than words, the current approach to protection, amounting to mere admonitions, must be replaced by centering accountability, accompanied by the political will to drive it.

That is the approach long taken by the Coalition, and recently taken by a report *In the Line of Fire*, issued in November 2024 by the World Health Organization and the World Innovation Summit for Health. It called for a new alliance of member states, UN agencies, and NGOs. It recognized that the renewal of long-ignored commitments could not possibly suffice. Instead, UN agencies, international organizations, NGOs, and civil society organizations must rally together to take tough action, including outreach to the International Criminal Court, to impose consequences on the perpetrators of violence. Actions must include states cutting off arms transfers to perpetrators of attacks and employing the power of universal jurisdiction to prosecute. If the laws of humanity are to be upheld and the carnage is to end, governments and all concerned citizens everywhere must find the political courage and will to act.





A handwritten signature in black ink, appearing to read 'Len Rubenstein'.

Len Rubenstein
Chair, Safeguarding Health in Conflict Coalition

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REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS


 REPORTED INCIDENTS	 HEALTH WORKERS ARRESTED	 INCIDENTS WHERE HEALTH FACILITIES WERE RAIDED	 HEALTH WORKERS KILLED
2024			
52	19	18	6
2023			
47	0	9	7
2022			
25	0	4	7


↓ Source: 2022-2024 YEM SHCC Health Care Data

OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 52 incidents of violence against or obstruction of health care in Yemen in 2024, compared to 47 in 2023 and 25 in 2022. In these incidents, 19 health workers were arrested and six killed, and health facilities were forcibly entered 18 times.

 The country experienced the world's highest number of cholera cases in 2024, with over 249,000 suspected cases and more than 800 related deaths being recorded.

 Houthi forces carried out multiple raids on hospitals and clinics for control and resource seizure purposes.

 Vaccination programs were disrupted by conflict, and vaccine hesitancy increased, leading to low vaccination coverage.

Information on incidents of violence against health care in Yemen is compiled from open sources, aid agency data-sharing mechanisms and information projects. See [Methodology](#) for further information.



THE CONTEXT

While the number of reported conflict incidents fell overall compared to 2023, conflict-related violence and clashes persisted, especially in Yemen's southwestern Abyan, Al Hudaydah, Lahij, Shabwah, and Ta'izz governorates.¹

The Houthis retained de facto control of the country's capital, Sana'a, and surrounding governorates in western Yemen. The internationally recognized government (IRG) based in Aden – and supported militarily by a Saudi-led coalition – remained in conflict with the Houthis and Al-Qaeda in the Arabian Peninsula (AQAP). The UAE-backed Southern Transitional Council (STC) – which was aligned against the Houthis, but in competition with the IRG – retained influence in southern Yemen, especially around Aden and Lahj cities.² Israel, the UK and U.S. conducted multiple airstrikes against Houthi infrastructure in 2024, following Houthi missile and drone strikes on international shipping in the Red Sea from November 2023.

The Houthis arbitrarily arrested and forcibly disappeared dozens of UN and NGO officials in areas under their control, possibly as part of a bargaining tool after the IRG moved major banks away from Houthi-controlled areas.

The country experienced the world's highest number of cholera cases in 2024, with over 249,000 suspected cases and more than 800 related deaths recorded. Severe flooding during rainy seasons between April and May and July and September killed at least 240 people, displaced 500,000, and damaged over 34,000 shelters. Overall, 18.2 million people were estimated to be in need of humanitarian assistance.

VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2024

Incidents of violence against or obstruction of health care were reported throughout 2024, with reports increasing in Aden, Ad Dali', Amanat Al Asimah, and Al Hudaydah governorates and continuing in Ta'izz governorate, where conflict persists.

Arrests of health workers increased sharply in 2024, and raids on health facilities continued, with the majority of these incidents being attributed to Houthi forces armed with guns. STC forces were also named as perpetrators. One incident recorded explosive weapons use in 2024, a decrease from 2023, when improvised explosive devices (IEDs) and drones armed with explosives were often reported in attacks on health care.

Most cases affected health care providers working for national health structures, with seven affecting private health organizations and two affecting INGOs.³

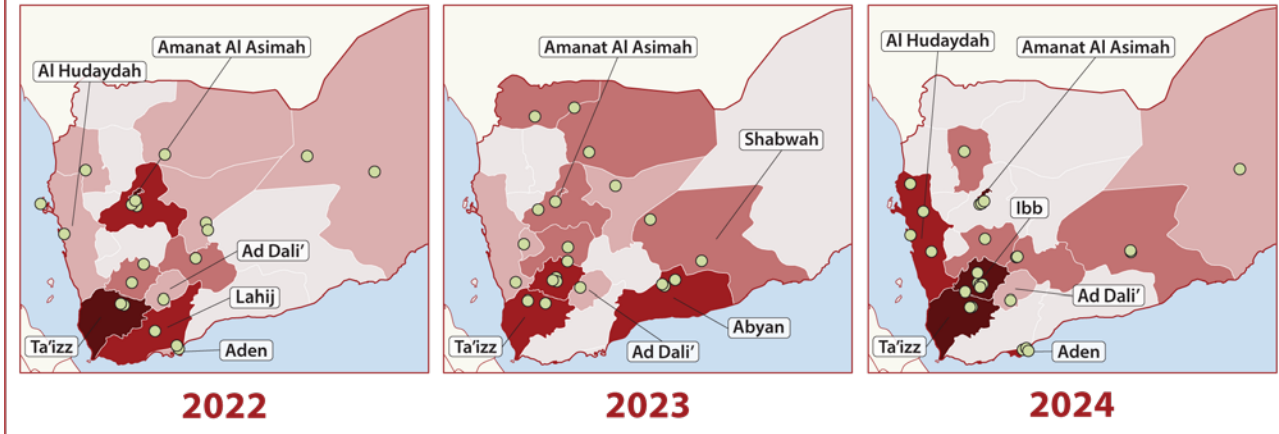
Health workers arrested

At least 19 health workers were arrested or detained in 13 incidents, which is a sharp rise from 2023, when no incidents were identified. Most arrests were carried out by Houthi forces, with one case involving STC forces in Aden detaining six health care staff on suspicions of having links to the Houthis.⁴ Arrested health workers included doctors, nurses, and hospital managers who were detained in hospitals, homes, and public spaces. Some arrested health workers were accused of medical neglect, including a Russian doctor blamed for a Houthi leader's wife's death, while others were targeted for online opinions supporting the Assad regime's removal in Syria.⁵ One doctor, who was reportedly arrested for unspecified reasons in his house, was tortured and killed by Houthi forces.⁶



Known locations of reported incidents affecting health care in Yemen, 2022-2024

Incidents increased in Ta'izz governorate, where conflict persists in 2024 and continued in Aden, Ad Dali', Amanat Al Asimah and Al Hudaydah governorates.



Source: Safeguarding Health in Conflict Coalition

Health workers killed

Six health workers were killed in six incidents in 2024, similar to numbers in previous years. Multiple doctors and nurses were shot and killed in public spaces, such as markets, hospitals, or near their homes, often by unidentified gunmen. Members of the STC Shabwani Elite forces shot a nurse at a checkpoint as he was on his way home from a hospital shift, and Houthi forces were implicated in the killing of the previously mentioned doctor they had arrested.

Health facilities raided and occupied

Health facilities were raided at least 19 times in 2024, double the number reported in 2023. Houthi forces carried out multiple raids on hospitals and clinics. In some raids, staff and patients, including those in critical condition, were forced to leave the facility. A medical diagnostic center was raided and forcibly taken over by Houthi forces following a dispute between the doctor and the landlord, and a Ministry of Defense medical warehouse near Aden International Airport was raided and looted of supplies by STC forces.⁷

Health facilities were taken over and used for non-medical purposes on six occasions in 2024. Sometimes facilities were used for military operations, such as when the STC used a health center as a military training center in Lahij governorate. The health centre stopped services as a result, depriving approximately 10,000 people of medical services.⁸ Kharkivska oblast.⁹



This factsheet is based on [2022-2024 YEM SHCC Health Care Data](#). Download the data [here](#) or on the [Humanitarian Data Exchange \(HDX\)](#).

THE IMPACT OF ATTACKS ON HEALTH CARE

Even before the start of the civil war in 2014, Yemen's health care system was fragile after decades of political instability, protracted violence and low investment in health care infrastructure. Armed conflict has weakened the system still further.



Violence and economic turmoil have produced working environments in which people are fearful for their safety, and have led to many health workers going unpaid or receiving “inconsistent salaries”. Consequently, many health workers have left Yemen since 2014 for better pay and working conditions elsewhere, including most of the 1,200 foreign health workers who were previously working in the country and locally trained health workers, creating a “brain drain.”

Health worker shortages have played a major factor in weakening the health care system in Yemen. As of February 2024, among 5,257 health care delivery units assessed in Yemen, 40% were either only partially functional or non-functional, with the lowest levels of functionality reported in Al Bayda and Sa’dah governorates. A lack of staff was cited as a reason for this dysfunctionality in 79% of cases and a lack of equipment in 53% of cases. Particularly high shortages of female health care workers have created acute barriers to health care access for sexual and reproductive health services, since social customs often require females to only be treated by female health care workers.

Conflict-related factors continued to create intense demands on Yemen’s health care system despite a reduction in the intensity of violence over the previous two years. Between May and June 2024 alone, the Yemen Health Cluster reported that over 1,000 patients were treated for conflict-related trauma. Unclean water supplies – partly caused by damage to essential infrastructure during the war – have continued to spread cholera. Vaccination programs have been disrupted by the conflict and vaccine hesitancy has reportedly increased, leading to low vaccination coverage.

The continued fragmentation of health care delivery between areas under the de facto control of the Houthis, on the one hand, and the IRG, on the other hand, has complicated the coordination of health policies. In turn, it has contributed to the lack of an effective country-wide health information system, limiting the availability of data for health policy analysts to develop evidence-informed policies.

Combined, these factors have intensified pressures on the remaining health workers and functioning facilities.





- 1 Armed Conflict Location & Event Data (ACLED) database attribution policy, <https://acleddata.com/privacy-policy/> (accessed January 17,2025).
- 2 ACAPS, "Yemen: Areas of Control," <https://data.humdata.org/dataset/yemen-areas-of-control> (accessed February 18, 2025).
- 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 YEM SHCC Health Care Data. Incident numbers 59885; 60175; 60176; 58315; 58345; 58346; 60174; 58313; 88645.
- 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 YEM SHCC Health Care Data. Incident number 88650.
- 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 YEM SHCC Health Care Data. Incident numbers 61131; 88654.
- 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 YEM SHCC Health Care Data. Incident number 44494.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 YEM SHCC Health Care Data. Incident numbers 67684; 88651.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 YEM SHCC Health Care Data. Incident number 95261.
- 9 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 UKR SHCC Health Care Data. Incident number 45708.

SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators.

<https://safeguarding-health.com>

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